

I'm calling today on behalf of the National Institutes of Health. We are calling households in your area to talk to African American adults about some health issues. My questions will take about 20 minutes to answer and your responses will be kept confidential and anonymous. Would you have time now to answer these questions?

1. Are you an African American over the age of 30?
 - a) Yes (continue)
 - b) No (terminate)

2. As I just mentioned, I'm calling from the National Institutes of Health and most of my questions today will focus on health issues. To start, what do you think is the most serious health problem facing African Americans today? [OPEN ENDED, PRECODED, CHECK ALL MENTIONED]
 - a) Heart disease
 - b) Cancer
 - c) AIDS
 - d) Diabetes
 - e) Hypertension
 - f) Kidney Disease
 - g) Lack of insurance
 - h) Other _____

3. As you may know, many African Americans have diabetes or sugar diabetes. On a scale from 1 to 10, where 1 is "not at all important" and 10 is "extremely important", how important do you think it is for people who have diabetes to keep their diabetes under control?

ENTER NUMBER FROM 1 to 10.

4. What bad things can happen if a person does not take care of their diabetes? [OPEN ENDED, PRECODED, CHECK ALL MENTIONED]
 - a) Stroke
 - b) Amputation
 - c) Premature death
 - d) Heart attack
 - e) Takes insulin
 - f) Kidney disease
 - g) Other - _____
 - h) Don't Know
 - i) Nothing

5. Do you know what kind of tests a person with diabetes or sugar diabetes should have regularly? [OPEN ENDED, PRECODED, CHECK ALL MENTIONED]
- a) Daily blood glucose/daily monitoring
 - b) Blood test (general)
 - c) Urine test (general)
 - d) Proteinuria
 - e) hbA1c
 - f) Microalbuminuria
 - g) Creatinine
 - h) GFR
 - i) Don't know

- 6 Do you have or has a doctor ever said you have diabetes?
- a) Yes (Ask 6a and 6b)
 - b) No
 - c) Don't know

IF option a checked:

- 6a What are you doing to keep your diabetes in control? [OPEN ENDED PRECODED, CHECK ALL MENTIONED]
- a) Nothing
 - b) Exercise
 - c) Dietary changes
 - d) Oral medications
 - e) Insulin injections
 - f) Nutritional or herbal supplements
 - g) Meditation/Spiritual intervention
 - h) Alternative therapies
 - i) Other
- 6b. On a scale from 1 to 10, how well do you think you follow your doctor's recommendations for your diabetes? A 1 means that you do not follow at all what your doctor recommends and a 10 means that you do everything your doctor recommends.
- ENTER NUMBER FROM 1 TO 10. ENTER 99 IF RESPONDENT DOESN'T SEE A DOCTOR FOR HIS/HER DIABETES.
7. As you may know, many African Americans also have high blood pressure or hypertension. On a scale from 1 to 10, where 1 means "not at all important" and 10 means "extremely important", how important do you think it is for a person who has this condition to manage their high blood pressure or hypertension?

ENTER NUMBER FROM 1 TO 10

8. What bad things can happen if a person does not take care of their hypertension? [OPEN ENDED, PRECODED, CHECK ALL MENTIONED]

- a) Stroke
- b) Amputation
- c) Premature death
- d) Heart attack
- e) Blindness
- f) Kidney disease
- g) Other
- h) Don't Know
- i) Nothing

9. Do you know what kind of tests a person with diabetes or sugar diabetes should have regularly? [OPEN ENDED, PRECODED, CHECK ALL MENTIONED]

- a) Blood pressure test
- b) Blood test (general)
- c) Urine test (general)
- d) Other
- e) Proteinuria
- f) hbA1c
- g) Microalbuminuria
- h) GFR
- i) Creatinine
- j) Don't know

10. Do you have or has a doctor ever said you have hypertension?

- a) Yes (Ask 10a and 10b)
- b) No
- c) Don't Know

10a What are you doing to keep your high blood pressure or hypertension in control? [OPEN ENDED PRECODED, CHECK ALL MENTIONED]

- a) Nothing
- b) Exercise
- c) Dietary changes
- d) Medication
- e) Regular monitoring
- f) Meditation/Spiritual intervention
- g) Nutritional/herbal supplements
- h) Alternative therapies
- i) Other - _____

- 10b. On a scale from 1 to 10, how well do you think you follow your doctor's recommendations for your hypertension? A 1 means that you do not follow at all what your doctor recommends and a 10 means that you do everything your doctor recommends.

ENTER NUMBER FROM 1 TO 10

ENTER 99 IF RESPONDENT DOESN'T SEE A DOCTOR FOR HIS/HER HYPERTENSION.

- 11 Have you ever heard of an illness called Kidney Disease?

- a) Yes
- b) No
- c) Not sure

12. Can you tell me what you think kidney disease is? (OPEN ENDED, PRECODED, CHECK ALL MENTIONED)

- a) General disease or ailment of the kidneys
- b) Kidney stones
- c) A type of cancer
- d) An infection of the kidneys
- e) When your kidneys stop working and you have to get dialysis or kidney transplant
- f) A reduced functioning of the kidneys
- g) A deadly illness (something that kills you)
- h) No idea

EXPLAIN: Kidney disease is a reduction in kidney function. It means that your kidneys are less able to balance fluids in your body, remove waste products from your blood, and release hormones into your blood.

13. Do you have kidney disease as I've just described it?

- a) Yes (Ask 14a through 14d)
- b) No (Ask 15a through 15f)
- c) Don't know (Ask 15a through 15f)

Q14: FOR THOSE WHO KNOW THEY HAVE KIDNEY DISEASE:

- 14a How do you know you have kidney disease? [OPEN ENDED, PRECODED, CHECK ALL MENTIONED]

- a) Doctor told me
- b) Have symptoms of it
- c) Had a test
- d) Other

- 14b I'd like to ask you a few questions about what you know about kidney disease.
What are the symptoms of kidney disease?
- a) No symptoms
 - b) Pain
 - c) Difficulty urinating
 - d) Frequent urination
 - e) Swelling
 - f) Fatigue
 - g) Other symptoms
 - h) Don't know
- 14c Who do you think is more likely to get kidney disease or is at higher risk for kidney disease?
- a) Persons with diabetes
 - b) Persons with hypertension
 - c) Family members of KD patients
 - d) Persons of a certain race Specify: _____
 - e) Persons of a certain age Specify: _____
 - f) Other
- 14d Do you think there was anything in particular that caused your kidney disease?
- a) Prescription medication
 - b) Diabetes
 - c) Hypertension
 - d) Too little water
 - e) Over the counter medication
 - f) Genetics/family risk
 - g) Poor diet
 - h) Poor treatment/doctor's fault
 - i) Other
- 14e How are you being treated for your kidney disease? [OPEN ENDED
PRECODED, CHECK ALL MENTIONED]
- a) No treatment
 - b) Exercise
 - c) Dietary changes
 - d) Medication
 - e) Hemodialysis
 - f) Peritonealdialysis
 - g) Waiting for transplant
 - h) Managing my diabetes
 - i) Managing my hypertension
 - j) Alternative medicine/therapies
 - k) Spiritual treatment/therapy
 - l) Other

- 14f On a scale from 1 to 10, how well do you think you follow your doctor's recommendations for your kidney disease? A 1 means that you do not follow at all what your doctor recommends and a 10 means that you do everything as your doctor recommends.

ENTER NUMBER FROM 1 to 10

- 14g On a scale from 1 to 10, where 1 means that you are not at all confident and 10 means you are extremely confident, how confident are you that you can prevent your kidney disease from getting worse?

ENTER NUMBER FROM 1 TO 10

Q15: FOR THOSE WHO SAY THEY DO NOT HAVE KIDNEY DISEASE OR DON'T KNOW IF THEY HAVE IT

- 15a. Who do you think is more likely to get kidney disease or is at higher risk for kidney diabetes?
- a) Persons with diabetes
 - b) Persons with hypertension
 - c) Family members of KD patients
 - d) Persons of a certain race Specify: _____
 - e) Persons of a certain age Specify: _____
 - f) Other
- 15b How likely do you think it is that you will get kidney disease? [READ RESPONSE OPTIONS] Do you think you will....
- a) Almost surely get it
 - b) Probably get it
 - c) May or may not get it
 - d) Probably not get it
 - e) Almost surely not get it
 - f) Don't know
- 15c How would you rate your risk for getting kidney disease. Do you think it is higher or lower than other people or about the same?
- a) Higher
 - b) Lower
 - c) Average
 - d) Don't know (SKIP Q. 15c)

15d Why do you think so? [OPEN ENDED PRECODED, CHECK ALL MENTIONED]

- a) Because I have hypertension
- b) Because I have diabetes
- c) Because I am Black/African American
- d) Because one or more family members have kidney disease/ kidney failure
- e) Because of my age
- f) Because I have symptoms
- g) Because I have no symptoms
- h) Because I have a healthy diet
- i) Because my family is healthy
- j) Because I drink lots of water
- k) Because I exercise regularly
- l) Spiritual reason (God looks after me, etc.)
- m) Because I have no reason to think I am at risk

15e Does kidney disease have any symptoms?

- a) Yes (ask 15f)
- b) No (ask 15g)
- c) Don't know (ask 15f)

15f. How do you think you would know if you had kidney disease? [OPEN ENDED PRECODED, CHECK ALL MENTIONED]

- a) Would not know
- b) Get tested
- c) Pain
- d) Difficulty urinating
- e) Frequent urination
- f) Swelling
- g) Fatigue
- h) Other symptoms
- i) Doctor would tell me
- j) Don't know

15g. Have you ever been tested for kidney disease?

- a) Yes (ask 15f)
- b) No (skip 15f, got to 16)
- c) Don't know (skip 15f, go to 16)

15h How recently did you have your last test?

- a) 1-6 months ago
- b) 6-12 months ago
- c) 1-2 years ago
- d) More than 2 years ago

FOR ALL RESPONDENTS:

16. Do you know what kind of tests a person can have to test for kidney disease?
- a) Blood pressure test
 - b) Blood test (general)
 - c) Urine test (general)
 - d) Proteinuria
 - e) Blood sugar or hbA1c
 - f) Microalbuminuria
 - g) GFR
 - h) Creatinine
 - i) Other - _____
- Don't know
17. On a scale from 1 to 10, how preventable do you think kidney disease is? A 1 means that kidney disease is not at all preventable and a 10 means that it is completely preventable.
- ENTER NUMBER FROM 1 TO 10. ENTER 99 FOR 'DON'T KNOW.'
18. On a scale from 1 to 10, how treatable do you think kidney disease is? A 1 means that kidney disease is not at all treatable and a 10 means that it is completely treatable.
- ENTER NUMBER FROM 1 TO 10. ENTER 99 FOR 'DON'T KNOW.'
19. What can a person do to prevent kidney disease?
- a) Control hypertension
 - b) Control diabetes
 - c) Have a healthy diet
 - d) Drink lots of water
 - e) Eat less protein
 - f) Avoid soda
 - g) Take medicine
 - h) Avoid medicines (general)
 - i) Avoid analgesics
 - a) Get tested
 - b) Exercise regularly
 - c) Nothing
 - d) Don't know
20. Have you ever discussed kidney disease with anyone?
- a) Yes (Go to 20a & 20b)
 - b) No (Got to 21)
 - c) Don't know
- 20a Who did you discuss it with?

- a) Doctor (Ask 20b)
 - b) Paraprofessional—nurse, pharmacist, physician assistant (ask 20b)
 - c) Friend/relative who has diabetes, hypertension or family member with kidney disease
 - d) Friend/relative with kidney disease/ or kidney failure
 - e) Friend/relative (general)
 - f) Other
- 20b What did your health care provider tell you? [OPEN ENDED, PRECODED, CHECK ALL MENTIONED]
- a) Control diabetes to prevent/control kidney disease
 - b) Control hypertension to prevent/control kidney disease
 - c) Medication change needed
 - d) Be tested regularly
 - e) That I am at risk for kidney disease or kidney failure
 - f) Other
 - g) Don't remember
- 21 Do you know anyone who has kidney disease?
- a) Yes (ask 21a)
 - b) No
 - c) Don't know
- 21a Who do you know?
- a) Friend/coworker
 - b) Relative (ask 21b)
Specify:
 - ☐ Parent ☐ Sibling
 - ☐ Grandparent ☐ Child
 - ☐ Aunt or Uncle ☐ Cousin
 - ☐ Non-blood relative (step or god-parent)
 - c) Other
- 21b Are you more likely to get kidney disease because you have a relative with kidney disease?
- a) Yes
 - b) No
 - c) Don't know
22. How common do you think kidney disease is? [Read responses: Would you say it is ...]
- a) Very common like diabetes or hypertension
 - b) Somewhat common like cancer
 - c) Not common like or
 - d) Very rare like
23. Have you ever encouraged anyone to get tested for kidney disease?
- a) Yes
 - b) No
 - c) Don't know

24. Have you seen or read any information on KD?
- a) Yes (ask 24a)
 - b) No
 - c) Don't know
- 24a Where did you see this information? [OPEN ENDED, PRECODED, CHECK ALL MENTIONED]
- a) In a newspaper or magazine
 - b) On TV
 - c) On the radio
 - d) A brochure
 - e) A poster
 - f) Education class
 - g) Internet
 - h) Other
 - i) Don't know/ don't remember
- 24b Were you looking for this information or did you just come upon it by chance?
- a) Looking for the information
 - b) Found it by chance
 - c) Don't know/don't remember

Now I'd like to ask you a few questions about yourself.

25. Which of the following best describes your age:
- a) 18-24
 - b) 25-34
 - c) 35-44
 - d) 45-54
 - e) 55-64
 - f) 65 or older
26. Which of the following best describes your yearly household income level?
- a) Less than 20,000
 - b) 20,000-39,000
 - c) 40,000-59,000
 - d) 60,000-79,000
 - e) 80,000-99,000
 - f) 100,000 or more
27. What is your zip code? _____
28. CODE Gender
- a) Male
 - b) Female